

TELEFAX COVER SHEET

RECEIVED
CENTRAL FAX CENTER

JUN 15 2004

OFFICIAL

MOSER, PATTERSON & SHERIDAN, LLP
ATTORNEYS AT LAW
595 SHREWSBURY AVENUE
FIRST FLOOR
SHREWSBURY, NJ 07702
TELEPHONE (732) 530-9404
TELEFAX (732) 530-9808

THIS TELEFAX MESSAGE IS ADDRESSED TO THE PERSON OR COMPANY LISTED BELOW.
IF IT WAS SENT OR RECEIVED INCORRECTLY, OR YOU ARE NOT THE INTENDED
RECIPIENT, PLEASE TAKE NOTICE THAT THIS MESSAGE MAY CONTAIN PRIVILEGED OR
CONFIDENTIAL MATERIAL, AND YOUR DUE REGARD FOR THIS INFORMATION IS
NECESSARY. YOU MAY ARRANGE TO RETURN THIS MATERIAL BY CALLING THE FIRM
LISTED ABOVE AT (732) 530-9404

THIS MESSAGE HAS 33 PAGES INCLUDING THIS SHEET

TO: Commissioner of Patents
FAX NO.: 703-872-9306
FROM: Eamon J. Wall/TV
DATE: June 15, 2004
MATTER: Serial No. 09/782,098 Filed: 2/13/01
DOCKET NO.: Moeller 9-12
APPLICANT: Moeller

The following has been received in the U.S. Patent and Trademark Office on the date of this facsimile:

<input type="checkbox"/> Petition	<input checked="" type="checkbox"/> Transmittal Letter (2 copies)
<input type="checkbox"/> Disclosure Statement & PTO-1449	<input type="checkbox"/> Fee Transmittal (2 copies)
<input checked="" type="checkbox"/> 1.132 Declaration	<input type="checkbox"/> Deposit Account Transaction
<input checked="" type="checkbox"/> Amendment - 29 pages	<input checked="" type="checkbox"/> Facsimile Transmission Certificate dated 6/15/04
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>

CERTIFICATE OF TRANSMISSION UNDER 37 C.F.R. §1.8

I hereby certify that this correspondence is being transmitted by facsimile to the Commissioner for Patents, Alexandria, VA 22313-1450 on 6/15/04, Facsimile No. 703-872-9306

Carol Wilson
Name of person signing this certificate

C. Wilson 6-15-04
Signature and date

PTO/SB/21 (08-03)

Please type a plus sign (+) inside this box → ☒

Approved for use through 7/31/2008. OMB 0851-0031

U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	09/782,098
	Filing Date	2/13/01
	First Named Inventor	Moeller
	Group Art Unit	2633
	Examiner Name	Nathan M. Curs
Total Number of Pages in This Submission	Attorney Docket Number	Moeller 9-12

ENCLOSURES (check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Response – 29 pages <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): 1.132 Declaration
Remarks		It is believed no fee is due. However, in the event a fee is due, kindly charge that fee to Deposit Account No. 20-0782. To facilitate that charge, a duplicate copy of this letter is enclosed.

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	Eamon J. Wall, Reg. No. 39,414 Moser, Patterson & Sheridan, LLP		
Signature	<i>E. J. Wall</i>		
Date	6/15/04		

CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.			
Typed or printed name	<i>C. Wilson</i>		
Signature	<i>C. Wilson</i>	Date	6-15-04

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon on the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S.